Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
MIDDLE DISTRICT OF FLORIDA		
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	■ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's	Julian First name	Janet First name
	license or passport).	Middle name	Middle name
	Bring your picture identification to your meeting with the trustee.	Santos Last name and Suffix (Sr., Jr., II, III)	Santos Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-2456	xxx-xx-0397

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Janet Santos Debtor 2 Case number (if known) About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have I have not used any business name or EINs. I have not used any business name or EINs. used in the last 8 years Include trade names and Business name(s) Business name(s) doing business as names EINs EINs Where you live If Debtor 2 lives at a different address: 1848 Penrith Loop Orlando, FL 32824 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code **Orange** County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing Check one: Check one: this district to file for bankruptcy Over the last 180 days before filing this petition, Over the last 180 days before filing this petition, I I have lived in this district longer than in any have lived in this district longer than in any other other district. district. I have another reason. I have another reason. Explain. (See 28 U.S.C. § 1408.) Explain. (See 28 U.S.C. § 1408.)

Debtor 1

Julian Santos

	otor 1 otor 2	Julian Santos Janet Santos					Case number (if known)	
Par	t 2:	Tell the Court About	our Bankı	uptcy Ca	ase			
7. The chapter of the Bankruptcy Code you are choosing to file under					n, see <i>Notice Required b</i> 1 and check the appropri	by 11 U.S.C. § 342(b) for Individuals Filing ate box.	for Bankruptcy	
	cnoc	sing to file under	☐ Chapte	er 7				
			☐ Chapte	er 11				
			☐ Chapte	er 12				
			■ Chapte	er 13				
8.	How	you will pay the fee	abo orde a pr	ut how your er. If your e-printed	ou may pay. Typically, attorney is submitting address.	if you are paying the fee your payment on your be	eck with the clerk's office in your local cour yourself, you may pay with cash, cashier's chalf, your attorney may pay with a credit countries.	check, or money ard or check with
			☐ I real but app	Filing Fe quest that is not req lies to yo	ee in Installments (Office it my fee be waived ('uired to, waive your fe ur family size and you	ial Form 103A). You may request this opti e, and may do so only if y are unable to pay the fee	ion only if you are filing for Chapter 7. By layour income is less than 150% of the officition in installments). If you choose this option, fficial Form 103B) and file it with your petiti	aw, a judge may, al poverty line that you must fill out
9.		you filed for	■ No.					
		ruptcy within the 3 years?	☐ Yes.					
				District		When	Case number	
				District		When	0	
				District		When	Case number	
10.		nny bankruptcy s pending or being	■ No					
	filed not f you,	by a spouse who is iling this case with or by a business er, or by an	☐ Yes.					
				Debtor			Relationship to you	
				District		When	Case number, if known	
				Debtor			Relationship to you	
				District		When	Case number, if known	
11.		ou rent your	■ No.	Go to I	ine 12.			
	. 0310		☐ Yes.	Has yo	our landlord obtained a	n eviction judgment agair	nst you?	
					No. Go to line 12.			
					Yes. Fill out <i>Initial Sta</i> this bankruptcy petition		n Judgment Against You (Form 101A) and	file it as part of

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	otor 1 otor 2	Julian Santos Janet Santos			Case number (if known)			
Par	t 3:	Report About Any Bu	sinesses	You Own as a Sole Propri	etor			
12.	of an	ou a sole proprietor y full- or part-time ness?	■ No.	Go to Part 4.				
			☐ Yes.	Name and location of bu	usiness			
	busin an in sepa as a	e proprietorship is a ess you operate as dividual, and is not a rate legal entity such corporation, ership, or LLC.		Name of business, if any	y			
	If you sole p	have more than one proprietorship, use a rate sheet and attach		Number, Street, City, St	ate & ZIP Code			
it to this petition. Check the appropriate box to describe your business:				pox to describe your business:				
				☐ Health Care Bus	siness (as defined in 11 U.S.C. § 101(27A))			
				☐ Single Asset Re	al Estate (as defined in 11 U.S.C. § 101(51B))			
				☐ Stockbroker (as)	☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))			
				☐ Commodity Broken	xer (as defined in 11 U.S.C. § 101(6))			
				☐ None of the abo	ve			
13.	Chap Bank	rou filing under oter 11 of the rruptcy Code and are a small business	deadline operation	s. If you indicate that you are	e court must know whether you are a small business debtor so that it can set appropriate e a small business debtor, you must attach your most recent balance sheet, statement of I federal income tax return or if any of these documents do not exist, follow the procedure			
		definition of small	■ No.	I am not filing under Cha	apter 11.			
		ess debtor, see 11 C. § 101(51D).	□ No.	I am filing under Chapte Code.	er 11, but I am NOT a small business debtor according to the definition in the Bankruptcy			
			☐ Yes.	I am filing under Chapte	r 11 and I am a small business debtor according to the definition in the Bankruptcy Code.			
Par	t 4:	Report if You Own or	Have Any	/ Hazardous Property or A	ny Property That Needs Immediate Attention			
14.		ou own or have any erty that poses or is	■ No.					
	alleg of im	ed to pose a threat minent and ifiable hazard to	☐ Yes.	What is the hazard?				
	public health or safety? Or do you own any property that needs immediate attention?			If immediate attention is needed, why is it needed?				
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?			Where is the property?				
	J	•			Number, Street, City, State & Zip Code			

Debtor 1	Julian Santos		
Debtor 2	Janet Santos	Case number (if known)	
		•	

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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	tor 1 Julian Santos tor 2 Janet Santos			Case i	number (if known)			
Part	6: Answer These Questi	ions for Re	enorting Purposes					
	What kind of debts do you have?	16a.	Are your debts primarily consur individual primarily for a personal,			s) as "incurred by an		
	,		□ No. Go to line 16b.	.a, aaasaa.a pa.pasa.				
			Yes. Go to line 17.					
		16b.	Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.					
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you owe th	at are not consumer debts or b	ousiness debts			
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chapter 7. Go	to line 18.				
	Do you estimate that after any exempt property is excluded and	☐ Yes.	I am filing under Chapter 7. Do you are paid that funds will be available			ninistrative expenses		
	administrative expenses		□No					
	are paid that funds will be available for distribution to unsecured		☐ Yes					
	creditors?							
18.	How many Creditors do	1 -49		1 ,000-5,000	25,001-50,000			
	you estimate that you owe?	50-99		□ 5001-10,000 □ 10,001-25,000	☐ 50,001-100,000 ☐ More than100,0			
		☐ 100-19 ☐ 200-99				100		
19.	How much do you	□ \$0 - \$9	50,000	□ \$1,000,001 - \$10 million	□ \$500,000,001 -	\$1 billion		
	estimate your assets to be worth?		01 - \$100,000	□ \$10,000,001 - \$50 million				
			001 - \$500,000 001 - \$1 million	□ \$50,000,001 - \$100 millior □ \$100,000,001 - \$500 million				
20.	How much do you	□ \$0 - \$9	,	□ \$1,000,001 - \$10 million	□ \$500,000,001 -			
	estimate your liabilities to be?		01 - \$100,000	□ \$10,000,001 - \$50 million	<u> </u>			
		■ \$100,001 - \$500,000 □ \$500,001 - \$1 million		□ \$50,000,001 - \$100 millior □ \$100,000,001 - \$500 million				
Part	7: Sign Below							
For	you	I have ex	amined this petition, and I declare u	under penalty of perjury that the	e information provided is true ar	nd correct.		
			chosen to file under Chapter 7, I am tates Code. I understand the relief a					
			rney represents me and I did not pa tt, I have obtained and read the noti			fill out this		
		I request	relief in accordance with the chapte	er of title 11, United States Cod	de, specified in this petition.			
			and making a false statement, conc cy case can result in fines up to \$25					
			n Santos	/s/ Janet S				
		Julian S Signature	e of Debtor 1	Janet Sant Signature of				
		Executed		Executed on	,			
			MM / DD / YYYY		MM / DD / YYYY			

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Debtor 1 Debtor 2	Julian Santos Janet Santos		Cas	se number (if known)
represent	attorney, if you are ed by one	I, the attorney for the debtor(s) named in this petition, do under Chapter 7, 11, 12, or 13 of title 11, United States for which the person is eligible. I also certify that I have	Code, and have educated delivered to the o	explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § 342(b)
	not represented by ey, you do not need page.	and, in a case in which § 707(b)(4)(D) applies, certify th schedules filed with the petition is incorrect.	at i nave no know	vieage after an inquiry that the information in the
	. •	/s/ Sophia Dean	Date	August 21, 2018
		Signature of Attorney for Debtor	_	MM / DD / YYYY
		Sophia Dean Printed name		
		The Orlando Law Group Firm name		
		12301 Lake Underhill Rd		
		Suite 213		
		Orlando, FL 32828		
		Number, Street, City, State & ZIP Code		
		Contact phone 407-512-4394	Email address	sdean@theorlandolawgroup.com
		FL		
		Bar number & State		

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=:::: :	n this infor	mation to identify your	00001			
		mation to identify your	case.			
Debt	IOT 1	Julian Santos First Name	Middle Name	Last Name		
Debt		Janet Santos				
(Spou	se if, filing)	First Name	Middle Name	Last Name		
Unite	ed States Ba	ankruptcy Court for the:	MIDDLE DISTRICT OF	FLORIDA		
Case	e number					
(if kno	wn)					k if this is an
					amen	ided filing
Sur Be as	nmary of complete mation. Fill	and accurate as possik out all of your schedul	ole. If two married people es first; then complete the	nd Certain Statistical Information are filing together, both are equally responsible form information on this form. If you are filing amend the box at the top of this page.	or supplyir	
Part	1: Summ	narize Your Assets				
					Your a	ussets of what you own
1.	Schedule A 1a. Copy lin	A/B: Property (Official Fine 55, Total real estate, f	orm 106A/B) rom Schedule A/B		\$	249,292.00
	1b. Copy lir	ne 62, Total personal pro	perty, from Schedule A/B		\$	16,795.00
	1c. Copy lir	ne 63, Total of all propert	y on Schedule A/B		\$	266,087.00
Part	2: Summ	narize Your Liabilities				
						iabilities nt you owe
2.			laims Secured by Property mn A, Amount of claim, at	(Official Form 106D) the bottom of the last page of Part 1 of Schedule D	\$	370,185.00
3.			Unsecured Claims (Officia 1 (priority unsecured claim	I Form 106E/F) s) from line 6e of <i>Schedule E/F</i>	\$	0.00
	3b. Copy th	he total claims from Part	2 (nonpriority unsecured c	laims) from line 6j of Schedule E/F	\$	34,426.00
				Your total liabilities	\$	404,611.00
Part	3: Summ	narize Your Income and	I Expenses			
4.		Your Income (Official Fo		1	\$	5,728.26
5.		l: Your Expenses (Officia monthly expenses from li			\$	2,886.00
Part	4: Answ	er These Questions for	Administrative and Stati	stical Records		
6.	-		er Chapters 7, 11, or 13?	heck this box and submit this form to the court with yo	our other sc	hedules.
7.	■ Yes	of debt do you have?		,		
٠.	THIAL KING	or dept do you nave?				
				debts are those "incurred by an individual primarily for g for statistical purposes. 28 U.S.C. § 159.	a personal	, family, or
	☐ Your o	debts are not primarily	consumer debts. You have	ve nothing to report on this part of the form. Check thi	s box and s	submit this form to

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

the court with your other schedules.

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Debtor 2	Janet Santos	Case number (if known)		
	n the Statement of Your Current Monthly Income: Cop A-1 Line 11: OR. Form 122B Line 11: OR. Form 122C-1 L	, ,	icial Form	\$ 8,555.33

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

Debtor 1 Julian Santos

	Total c	laim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	31,190.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	31,190.00

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	Case 0.10-L	JK-03073-C	C3 DUCT	1 11 C U 00/21/10	rage 10	01 37	
Fill in this inform	mation to identify your ca	ase and this fili	ng:				
Debtor 1	Julian Santos						
	First Name	Middle Name	La	st Name			
Debtor 2 (Spouse, if filing)	Janet Santos First Name	Middle Name	la	st Name			
			CT OF FLORIDA	st wante			
Omica Clares Ba							
Case number _							Check if this is an amended filing
	orm 106A/B						
Schedul	e A/B: Prope	erty					12/15
Answer every ques	e space is needed, attach a stion. Each Residence, Building, I		·		, write your name	and case	number (if known).
1. Do you own or h	have any legal or equitable i	nterest in any res	sidence, building, lan	d, or similar property?			
☐ No. Go to Par	rt 2.						
Yes. Where is	s the property?						
1.1 1848 Penr Street address,	rith Loop if available, or other description	Wh	nat is the property? C Single-family home	e			ims or exemptions. Put claims on Schedule D:
			Condominium or c	-	Creditors Who I	Who Have Claims Secured by F	
		[■ Manufactured or n	nobile home	Current value of	of the	Current value of the
Orlando			Land		entire property		portion you own?
City	State ZIF	Code [☐ Investment proper☐ Timeshare	ty	\$249,2	92.00	\$249,292.00
		_	Other				our ownership interest incy by the entireties, or
		Wh	no has an interest in t	he property? Check one	a life estate), if		inoy by the onthonou, or
			Debtor 1 only		Fee simple		
Orange			Debtor 2 only				
County		Ī	Debtor 1 and Debt At least one of the	or 2 only debtors and another	☐ Check if th		munity property
		Oth		vish to add about this iter	`	,	
		•	arcel ld: 32-24-30				
	lar value of the portion you						\$249,292.00
Part 2: Describe					ŕ		

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

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	otor 1 otor 2	Julian Sar Janet San			Case number (if known)	
з. с	ars, va	ns, trucks, tr	actors, sport utility ve	hicles, motorcycles		
П	l No					
	Yes					
-	Yes					
2.4	Make	- Mazda		Who has an interest in the manager, 2 Objections	Do not deduct sec	ured claims or exemptions. Put
3.1		01/0		Who has an interest in the property? Check one ☐ Debtor 1 only	the amount of any	secured claims on Schedule D:
	Mode Year			_ ′	Creditors who Hav	ve Claims Secured by Property.
			97000	Debtor 2 only	Current value of t	
		oximate mileag r information:	e: 37000	■ Debtor 1 and Debtor 2 only	entire property?	portion you own?
	_		A6D0413723	☐ At least one of the debtors and another		
		OMOTBEDA	1000410720	Check if this is community property (see instructions)	\$11,725	.00 \$11,725.00
5 A	ages y	ou have atta		rn for all of your entries from Part 2, including that number here		\$11,725.00
Do	you ow	n or have an	y legal or equitable in	terest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	Example ☑ No —		d furnishings iances, furniture, linens	s, china, kitchenware		
			Dining room: ta Bedrooms: 4 be dvd player, con	chairs, refrigerator, dishwasher, washin	•	
				acuum cleaner, iron, power tools		\$3,930.00
8. C	No Yes. ollectik Example	es: Television including of Describe Describe of value es: Antiques a	cell phones, cameras, n	prints, or other artwork; books, pictures, or other		
			DVD movies			\$40.00

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Debtor 1 Debtor 2	Julian Santo Janet Santo		f known)
<i>Exam</i> _l □ No	ment for sports all poles: Sports, photo musical instrus. Describe	graphic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis;	canoes and kayaks; carpentry tools;
		old baseball and softball equipment	\$50.00
■ No □ Yes	mples: Pistols, rifles	s, shotguns, ammunition, and related equipment	
□ No		othes, furs, leather coats, designer wear, shoes, accessories	
		Used Clothing	\$800,00
☐ No		welry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches,	gems, gold, silver
		Costume jewelry	
Exan	farm animals nples: Dogs, cats, s. Describe	birds, horses	
		2 Dogs	\$2.00
No Yes	s. Give specific inf I the dollar value Part 3. Write that	of all of your entries from Part 3, including any entries for pages you have attac number here	
	Describe Your Finan Down or have any l	egal or equitable interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
■ No	mples: Money you	nave in your wallet, in your home, in a safe deposit box, and on hand when you file yo	our petition
Exan		avings, or other financial accounts; certificates of deposit; shares in credit unions, bro If you have multiple accounts with the same institution, list each. Institution name:	kerage houses, and other similar

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Debtor 1 Debtor 2	Julian Santos Janet Santos		Case number (if known)	
	17.1.		Bank of America Savings XXXX-5694	\$0.00
	17.2.		Bank of America Checking XXXX-7621	\$23.36
	17.3.		Chase Checking XXXX-8315	\$10.40
	17.4.		Chase checking 8391	\$10.24
	17.5.		Chase checking 5298	\$0.00
Exam ■ No	,		ge firms, money market accounts	
19. Non- p	•••••		and unincorporated businesses, including an interest in an LLC, par	tnership, and
■ No	. Give specific information at	pout theme of entity:	% of ownership:	
Nego Non-i ■ No	tiable instruments include pe negotiable instruments are the . Give specific information ab	rsonal checks, cashiers' ose you cannot transfer	e and non-negotiable instruments checks, promissory notes, and money orders. to someone by signing or delivering them.	
	ement or pension accounts		thrift savings accounts, or other pension or profit-sharing plans	
■ Yes	. List each account separately Type of	y. account:	Institution name:	
			Orange County Public Schools Retirement	Unknown
Your		you have made so that y	ou may continue service or use from a company utilities (electric, gas, water), telecommunications companies, or others	
■ Yes	·		Institution name or individual:	\$15 <i>4</i> .00
			Orange County Utilities	\$154.00
■ No			ou, either for life or for a number of years)	
☐ Yes	lssuer name	and description.		
26 U.S	sts in an education IRA, in a 5.C. §§ 530(b)(1), 529A(b), an		ed ABLE program, or under a qualified state tuition program.	
■ No □ Yes	Institution na	me and description. Sep	arately file the records of any interests.11 U.S.C. § 521(c):	

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	ebtor 1 ebtor 2	Julian Santos Janet Santos	Case number (if known)	
25	. Trusts	equitable or future interests in property (other than anything listed	d in line 1), and rights or powers exercis	sable for your benefit
	■ No □ Yes.	Give specific information about them		
26	. Patent	s, copyrights, trademarks, trade secrets, and other intellectual proples: Internet domain names, websites, proceeds from royalties and licer		
		Give specific information about them		
27	Examp ■ No	es, franchises, and other general intangibles les: Building permits, exclusive licenses, cooperative association holdin Give specific information about them	ngs, liquor licenses, professional licenses	
М		property owed to you?		Current value of the
		,,		portion you own? Do not deduct secured claims or exemptions.
28		unds owed to you		
	■ No □ Yes.	Give specific information about them, including whether you already file	d the returns and the tax years	
29	■ No	support les: Past due or lump sum alimony, spousal support, child support, mai Give specific information	ntenance, divorce settlement, property set	tlement
30		mounts someone owes you les: Unpaid wages, disability insurance payments, disability benefits, sie benefits; unpaid loans you made to someone else	ck pay, vacation pay, workers' compensat	ion, Social Security
	☐ Yes.	Give specific information		
31		ts in insurance policies les: Health, disability, or life insurance; health savings account (HSA); or	credit, homeowner's, or renter's insurance	
	☐ Yes.	Name the insurance company of each policy and list its value. Company name:	Beneficiary:	Surrender or refund value:
32	If you a some o	erest in property that is due you from someone who has died ure the beneficiary of a living trust, expect proceeds from a life insurance ne has died. Give specific information	e policy, or are currently entitled to receive	property because
33	Examµ ■ No	against third parties, whether or not you have filed a lawsuit or males: Accidents, employment disputes, insurance claims, or rights to sue		
34		ontingent and unliquidated claims of every nature, including coun	terclaims of the debtor and rights to se	t off claims
	■ No	Describe each claim		
35		ancial assets you did not already list		
50	■ No	Give specific information		

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Debi	tor 1 tor 2	Julian Santos Janet Santos		Case number (if known)	
36.		he dollar value of all of your entries from Part 4, includir art 4. Write that number here			\$198.00
Part	5: Des	scribe Any Business-Related Property You Own or Have an Inte	rest In. List any real esta	ate in Part 1.	
37. D	o you c	own or have any legal or equitable interest in any business-relat	ed property?		
	No. Go	to Part 6.			
	Yes. G	to to line 38.			
Part		scribe Any Farm- and Commercial Fishing-Related Property You ou own or have an interest in farmland, list it in Part 1.	ı Own or Have an Intere	st In.	
46. [Do you	own or have any legal or equitable interest in any farm-	or commercial fishir	ng-related property?	
	■ No.	Go to Part 7.			
	☐ Yes.	Go to line 47.			
Part	7:	Describe All Property You Own or Have an Interest in That Yo	u Did Not List Above		
		have other property of any kind you did not already list	?		
		eles: Season tickets, country club membership			
	No	0			
L	J Yes.	Give specific information			
54.	Add t	he dollar value of all of your entries from Part 7. Write th	at number here		\$0.00
Part	8:	List the Totals of Each Part of this Form			
55.	Part 1	: Total real estate, line 2			\$249,292.00
56.	Part 2	: Total vehicles, line 5	\$11,725.00		
57.	Part 3	: Total personal and household items, line 15	\$4,872.00		
58.	Part 4	: Total financial assets, line 36	\$198.00		
59.	Part 5	: Total business-related property, line 45	\$0.00		
60.	Part 6	: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7	: Total other property not listed, line 54 +	\$0.00		
62.	Total	personal property. Add lines 56 through 61	\$16,795.00	Copy personal property total	\$16,795.00
63.	Total	of all property on Schedule A/B. Add line 55 + line 62			\$266,087.00

		O450 0.10 BK	00070 000 000	_	1 1100 00/21/10 1 age	10 01 01				
Fil	I in this information	on to identify your case	:							
De	btor 1	Iulian Santos								
		irst Name	Middle Name	L	ast Name					
		lanet Santos irst Name	Middle Name		ast Name					
	. 0,									
Un	ited States Bankru	ptcy Court for the: MII	DDLE DISTRICT OF FLOI	RIDA						
	se number					☐ Check if this is an amended filing				
S		C: The Prop	erty You Cla			4/16				
the nee	property you listed	on Schedule A/B: Prope ach to this page as many	rty (Official Form 106A/B)	as yo	our source, list the property that you					
spe any fun exe to t	cific dollar amou applicable statut ds—may be unlin mption to a partic he applicable stat	nt as exempt. Alternativ ory limit. Some exempt hited in dollar amount. I cular dollar amount and	ely, you may claim the for ions—such as those for However, if you claim an the value of the propert	ull fai heal exen	th aids, rights to receive certain b nption of 100% of fair market valu	ing exempted up to the amount of enefits, and tax-exempt retirement				
		• •	•							
1.	wnich set of exe	emptions are you ciaimi	ng? Check one only, ever	n if yo	our spouse is filing with you.					
	You are claiming	ng state and federal nonb	eankruptcy exemptions. 1	1 U.S	S.C. § 522(b)(3)					
	☐ You are claimi	ng federal exemptions.	11 U.S.C. § 522(b)(2)							
2.	For any property	any property you list on Schedule A/B that you claim as exempt, fill in the information below.								
	Brief description o	f the property and line on	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption				
	Scriedule A/B tilat	nata tina property	Copy the value from Schedule A/B	Che	eck only one box for each exemption.					
	1848 Penrith L Orange County	oop Orlando, FL 3282 /	24 \$249,292.00		100%	Fla. Const. art. X, § 4(a)(1); Fla. Stat. Ann. §§ 222.01 &				
	Parcel Id: 32-2	4-30-9628-07-058 lle A/B: 1.1			100% of fair market value, up to any applicable statutory limit	222.02				
	Living room: 2 player, rug, wa	couches, tv, dvd	\$3,930.00		\$2,000.00	Fla. Const. art. X, § 4(a)(2)				
	Dining room: t silverware Bedrooms: 4 b dressers, desk dvd player, co	able, chairs, china, eds, 4 chairs, 4 s, mirror, 3 lamps, tv, mputer chairs, refrigerator, ashing mac			100% of fair market value, up to any applicable statutory limit					
	Orange County	/ Public Schools	Unknown		100%	Fla. Stat. Ann. § 222.21(2)				

Retirement

Line from Schedule A/B: 21.1

□ 100% of fair market value, up to

any applicable statutory limit

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Debtor 1 Debtor 2		lian Santos net Santos	Case number (if known)	
	•	claiming a homestead exemption of more than \$160,375? o adjustment on 4/01/19 and every 3 years after that for cases filed on or	after the date of adjustment.)	
	Yes.	Did you acquire the property covered by the exemption within 1,215 days	before you filed this case?	
		Voc		

Fill in this informa	tion to identify you	ır case:				
Debtor 1	Julian Santos					
	First Name	Middle Name Last Name				
Debtor 2	Janet Santos					
(Spouse if, filing)	First Name	Middle Name Last Name				
United States Bank	ruptcy Court for the:	MIDDLE DISTRICT OF FLORIDA				
Case number						
(if known)					if this is an	
				amend	ed filing	
Official Form	106D					
		Who Hove Claims Soours	d by Droport		40/45	
Schedule L	: Creditors	Who Have Claims Secure	a by Propert	<u>y </u>	12/15	
		If two married people are filing together, both are e out, number the entries, and attach it to this form. O				
1. Do any creditors ha	ve claims secured by	your property?				
□ No. Check the property of the property o	nis box and submit tl	his form to the court with your other schedules. \	You have nothing else t	o report on this form.		
_	Il of the information	·	· ·			
		bolow.				
	Secured Claims		Column A	Column B	Column C	
for each claim. If more	e than one creditor has	more than one secured claim, list the creditor separatel a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any	
2.1 Ally Financi	al	Describe the property that secures the claim:	\$25,302.00	\$11,725.00	\$13,577.00	
Creditor's Name		2013 Mazda CX9 97000 miles Vin: JM3TB2DA6D0413723				
Attn: Bankr	uptcy Dept					
Po Box 380		As of the date you file, the claim is: Check all that apply.				
Bloomingto	n, MN 55438	Contingent				
Number, Street, Ci	ty, State & Zip Code	Unliquidated				
Who owes the debt	3 Oh Iv	Disputed				
Debtor 1 only	f Check one.	Nature of lien. Check all that apply. ☐ An agreement you made (such as mortgage or see	an ura d			
Debtor 2 only		car loan)	ecureu			
■ Debtor 1 and Debt	or 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)				
☐ At least one of the	,	☐ Judgment lien from a lawsuit				
☐ Check if this clair	n relates to a	Other (including a right to offset)				
community debt						
	Opened 11/16 Last					
Date debt was incurr	Active	Last 4 digits of account number 3822				
Date debt was incur	eu //00/16	Last 4 digits of account number 3822				
Independen	at Savings					
Plan Compa		Describe the property that secures the claim:	\$3,970.00	\$0.00	\$3,970.00	
Creditor's Name		Water Filtration System				
1115 Gunn Suite 100	Highway	As of the date you file, the claim is: Check all that				
Odessa, FL	33556	apply. Contingent				
	ty, State & Zip Code	☐ Unliquidated				
, ,		☐ Disputed				
Who owes the debt	? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		☐ An agreement you made (such as mortgage or se	ecured			
Debtor 2 only		car loan)				
Debtor 1 and Debt	-	☐ Statutory lien (such as tax lien, mechanic's lien)				
☐ At least one of the	debtors and another	☐ Judgment lien from a lawsuit				

Official Form 106D

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Debtor 1 Julian Santos		Case number (if know)		
First Name Middle N Debtor 2 Janet Santos	lame Last Name			
First Name Middle N	Name Last Name			
_	_			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
community debt				
Opened				
03/14 Last				
Active Date debt was incurred 7/23/18	Last 4 digits of account number 8711			
2.3 Universal Amer Mortg/d	Describe the property that secures the claim:	\$340,913.00	\$249,292.00	\$91,621.00
Creditor's Name	1848 Penrith Loop Orlando, FL			
	32824 Orange County			
	Parcel Id: 32-24-30-9628-07-058 As of the date you file, the claim is: Check all that			
1 Corporate Dr	apply.			
Lake Zurich, IL 60047	Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
Who owes the debt? Check one.	Disputed			
Debtor 1 only	Nature of lien. Check all that apply.	a aura d		
Debtor 2 only	☐ An agreement you made (such as mortgage or s car loan)	ecureu		
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a	Other (including a right to offset)			
community debt				
Opened				
01/14 Last				
Active Date debt was incurred 9/08/16	Last 4 digits of account number 8170			
Wyndham Lakes Estates				
HOA	Describe the property that secures the claim:	\$0.00	\$249,292.00	\$0.00
Creditor's Name	1848 Penrith Loop Orlando, FL			
	32824 Orange County			
	Parcel Id: 32-24-30-9628-07-058 As of the date you file, the claim is: Check all that			
6972 Lake Gloria Blvd.	apply.			
Orlando, FL 32809	☐ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated ☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortgage or s	ecured		
Debtor 2 only	car loan)			
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
\square At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
-				
Date debt was incurred	Last 4 digits of account number			
Add the dollar value of your entries in 0	Column A on this page. Write that number here:	\$370,185.	00	
If this is the last page of your form, add	· -	\$370,185.		
Write that number here:	· -	\$370,185.	00	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

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Debtor 1	Julian Santos			Case number (if know)	
	First Name	Middle Name	Last Name		
Debtor 2	Janet Santos				
	Firet Name	Middle Name	Last Name		

		Case 6:18-	DK-05075	·CCJ Doo	cı Filed	08/21/18	Page 21 of 57	
Fill in	this informati	on to identify your o	case:					
Debtor	r 1	Julian Santos						
Dobtoi	•	First Name	Middle Na	me	Last Name			
Debtor	12	Janet Santos						
(Spouse	if, filing) F	First Name	Middle Na	me	Last Name			
United	States Bankru	ptcy Court for the:	MIDDLE DIS	TRICT OF FLOI	RIDA			
Case r	number							
(if known				-				Check if this is an
							a	mended filing
Offici	ial Form 1	06E/E						
		<u>○○□/।</u> : Creditors W	ho Hayo	Uncocuro	d Claime			12/15
						D. 101	W NONDRIGHTY IS	ms. List the other party to
Schedul left. Atta name ar	le D: Creditors \ ach the Continu nd case number	Who Have Claims Secu ation Page to this pag (if known).	ured by Propert e. If you have n	y. If more space is to information to r	s needed, copy	the Part you need	h partially secured claims l, fill it out, number the en ırt. On the top of any addi	tries in the boxes on the
Part 1		Your PRIORITY Un						
_	•	ave priority unsecured	d claims agains	t you?				
	No. Go to Part 2							
	Yes.							
Part 2:	List All of	Your NONPRIORIT	Y Unsecured	Claims				
3. Do	any creditors h	ave nonpriority unsec	ured claims aga	ainst you?				
	No. You have no	othing to report in this pa	art. Submit this fo	orm to the court wit	th your other sche	edules.		
	Yes.							
uns tha	secured claim, lis	t the creditor separately	for each claim.	For each claim liste	ed, identify what t	type of claim it is. D	n. If a creditor has more tha Do not list claims already inc unsecured claims fill out the	cluded in Part 1. If more
								Total claim
4.1	Capital On	е		Last 4 digits of a	ccount number	1746		\$2,766.00
	Nonpriority Cre					0 144	—	
	Attn: Bank Po Box 302			When was the de	ht incurred?	Opened 11/ ³ 7/06/18	13 Last Active	
	–	City, UT 84130		rmon was and as	Di mourrou .	1700/10		-
		City State Zlp Code		As of the date yo	u file, the claim i	is: Check all that a	pply	
	Who incurred	the debt? Check one.						
	Debtor 1 or	nly		☐ Contingent				
	Debtor 2 or	nly		☐ Unliquidated				
	Debtor 1 ar	nd Debtor 2 only		☐ Disputed				
	☐ At least one	e of the debtors and and	other	Type of NONPRIC	ORITY unsecured	d claim:		
		is claim is for a comn	nunity	Student loans				
	debt	ubject to offset?				aration agreement	or divorce that you did not	
	_	abject to onset?		report as priority cl		ng plans, and other	similar debts	
	■ No						Similal UEDIS	
	☐ Yes			Other. Specify	Credit Card	ג		

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Debtor Debtor	Julian Santos Janet Santos		Case number (if know)			
4.2	Capital One Nonpriority Creditor's Name	Last 4 digits of account number	7524	\$470.00		
	Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130	When was the debt incurred?	Opened 11/13 Last Active 7/06/18			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	☐ Debtor 1 only	☐ Contingent				
	■ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other. Specify Credit Card	<u> </u>			
4.3	NeInet Nonpriority Creditor's Name	Last 4 digits of account number	3559	\$17,571.00		
	Attn: Claims Po Box 82505	When was the debt incurred?	Opened 02/06 Last Active 7/31/18			
	Lincoln, NE 68501 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply			
	Who incurred the debt? Check one.	,	- C.			
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims				
	No	Debts to pension or profit-sharing	\square Debts to pension or profit-sharing plans, and other similar debts			
	☐ Yes	Other. Specify				
		Educationa	ıl			
4.4	Nelnet	Last 4 digits of account number	3459	\$13,619.00		
	Nonpriority Creditor's Name Attn: Claims Po Box 82505	When was the debt incurred?	Opened 02/06 Last Active 7/31/18			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim: ■ Student loans				
	☐ At least one of the debtors and another					
	☐ Check if this claim is for a community					
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	Debts to pension or profit-sharing				
	Yes	Other. Specify				
		Educationa	ıl			

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you

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	Turior Guines	(
Debtor 2	Janet Santos	Case number (if know)	
Debtor 1	Julian Santos		

have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
	6f.	Student loans	6f.	\$ 31,190.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.		6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 3,236.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 34,426.00

Fill in this infor	mation to identify your	case:		
Debtor 1	Julian Santos			
	First Name	Middle Name	Last Name	
Debtor 2	Janet Santos			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	MIDDLE DISTRICT OF	FLORIDA	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with Name, Number	whom you have th , Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.3	Oity		Otate	Zii Oode	
0	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_

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Fill in this	information to identify your	case:			
Debtor 1	Julian Santos				
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, filing	ng) Janet Santos First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	MIDDLE DISTRICT OF	FLORIDA		
Case num (if known)	ber				☐ Check if this is an amended filing
Officia	l Form 106H				
	lule H: Your Cod	lebtors			12/15
your name 1. Do	e and case number (if known you have any codebtors? (if). Answer every questio	n.		of any Additional Pages, write
■ No □ Yes	S				
	hin the last 8 years, have yo na, California, Idaho, Louisiana				states and territories include
	. Go to line 3. s. Did your spouse, former spo	use, or legal equivalent liv	ve with you at the time?		
in line Form	2 again as a codebtor only	if that person is a guara	ntor or cosigner. Make s	ure you have listed the	with you. List the person shown creditor on Schedule D (Official chedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and 2	IP Code		Column 2: The credi	itor to whom you owe the debt that apply:
3.1				☐ Schedule D, line	
0.1	Name			☐ Schedule E/F, line ☐ Schedule G, line	e
	Number Street City	State	ZIP Code	-	
3.2				☐ Schedule D, line	
	Name			☐ Schedule E/F, line ☐ Schedule G, line	e
	Number Street			-	
	City	State	ZIP Code		

Fill	in this information to identify your ca	ase:		
Del	otor 1 Julian Santo	os		
	otor 2 Janet Santo use, if filing)	s		
Uni	ted States Bankruptcy Court for the	: MIDDLE DISTRICT O	F FLORIDA	
O Se a sup spo atta	plying correct information. If you use. If you are separated and you	sible. If two married peo are married and not filir r spouse is not filing wi	ng jointly, and your spouse is livin ith you, do not include information	Check if this is: An amended filing A supplement showing postpetition chapter 13 income as of the following date: MM / DD/ YYYY 12/15 and Debtor 2), both are equally responsible for a with you, include information about your a about your spouse. If more space is needed, case number (if known). Answer every question
1.	Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse
	If you have more than one job, attach a separate page with	Employment status	■ Employed	■ Employed□ Not employed
	information about additional employers.	Occupation	Account Manager	Teacher
	Include part-time, seasonal, or self-employed work.	Employer's name	Staples Inc	Orange County Public Schools
	Occupation may include student or homemaker, if it applies.	Employer's address	1901 Summit Tower Blvd. Orlando, FL 32810	901 South Bumby Rd Orlando, FL 32806

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

How long employed there?

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

13 years

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

Give Details About Monthly Income

3. Estimate and list monthly overtime pay.

4. Calculate gross Income. Add line 2 + line 3.

			non-	filing spouse
2.	\$	3,553.50	\$	5,001.83
3.	+\$_	0.00	+\$	0.00
4.	\$	3.553.50	\$	5.001.83

For Debtor 1

14 years

For Debtor 2 or

Official Form 106I Schedule I: Your Income page 1

Debt Debt		Julian Santos Janet Santos	-		Cas	se number (if k	nown)				
					F	or Debtor 1			or Debtor on-filing s		
	Сор	by line 4 here	4.		\$	3,55	3.50	\$	5	,001.83	•
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a	а.	\$	64	1.79	\$		495.94	
	5b.	Mandatory contributions for retirement plans	5b	ο.	\$		0.00	\$		127.46	
	5c.	Voluntary contributions for retirement plans	50		\$		6.07	\$		0.00	
	5d.	Required repayments of retirement fund loans	50		\$		0.00	\$		0.00	
	5e. 5f.	Insurance Domestic support obligations	5∈ 5f		\$ \$		0.00 0.00	ф Ф		701.28	=
	5g.	Union dues	5 <u>0</u>		\$		0.00	\$		48.33	
	5h.	Other deductions. Specify: lincoln disability		ง. า.+			0.00	*		35.80	
		deferred pay	_		\$		0.00	\$		560.40	-
6.	Add	I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	85	7.86	\$	1	,969.21	•
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	2,69	5.64	\$	3	032.62	•
8.		all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	88		\$,	0.00	\$	<u> </u>	0.00	
	8b.	Interest and dividends	8b		\$		0.00	\$		0.00	-
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.			\$		0.00	\$		0.00	•
	8d.	Unemployment compensation	80		\$		0.00	\$		0.00	-
	8e.	Social Security	86	Э.	\$		0.00	\$		0.00	•
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f		\$	(0.00	\$		0.00	
	8g.	Pension or retirement income	80	-	\$		0.00	\$		0.00	
	8h.	Other monthly income. Specify:	_ 8r	า.+	\$		0.00	+ \$		0.00	
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.		\$_		0.00	\$		0.00)
10.	Cald	culate monthly income. Add line 7 + line 9.	10.	\$		2,695.64	+ \$	•	3,032.62	= \$	5,728.26
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		٠.		2,000.04			,,002.02		0,1 20.20
11.	Inclu othe	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a cify:	depe					•	Schedule	∍ J. +\$	0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The res e that amount on the Summary of Schedules and Statistical Summary of Certailies								\$	5,728.26
13.	Do y	you expect an increase or decrease within the year after you file this form?	?								y income
		Yes. Explain:									

	: th::. :	ation to identify				ſ			
		ation to identify yo				01			
Deb	otor 1	Julian Santo	S			Cr		f this is: amended filing	
	otor 2 ouse, if filing)	Janet Santos	<u> </u>				Α:	supplement show	wing postpetition chapter the following date:
Unit	ed States Bank	ruptcy Court for the:	MIDDLI	E DISTRICT OF FLORIDA	<u> </u>		M	M / DD / YYYY	
1	se number nown)								
		orm 106J							
Be info	as complete ormation. If n mber (if know	nore space is nee n). Answer ever	possible eded, atta y questio	. If two married people and the control of the cont					
Par 1.	t 1: Desc	ribe Your House nt case?	hold						
•	□ No. Go to								
	_	es Debtor 2 live i	n a separ	ate household?					
	■ N		st file Offici	al Form 106J-2, <i>Expense</i> s	s for Separate House	ehold of D	ebtor	2.	
2.	Do you hav	e dependents?	□ No						
	Do not list D Debtor 2.	ebtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		_	Dependent's age	Does dependent live with you?
	Do not state dependents				Son			14	□ No ■ Yes
					Daughter			18	□ No ■ Yes □ No
					Daughter			21	■ Yes
									□ No □ Yes
3.	expenses of	penses include of people other the od your depender	nan $_{f au}$	No Yes	-				1 100
exp	imate your e	a date after the b	our bankrı	ly Expenses uptcy filing date unless y y is filed. If this is a supp					
the		h assistance and		government assistance i cluded it on <i>Schedule I:</i> `				Your exp	enses
4.		or home ownershind any rent for the		ses for your residence. I	nclude first mortgage		\$		0.00
	If not include	ded in line 4:							
	4a. Real	estate taxes				4a.	\$		0.00
		erty, homeowner's	s, or renter	's insurance		4b.	_		0.00
	4c. Home	e maintenance, re	pair, and ι	upkeep expenses		4c.			100.00
_		eowner's associati				4d.			0.00
5.	Additional	mortgage payme	ents for yo	our residence, such as ho	me equity loans	5.	\$		0.00

	tor 1 tor 2	Julian Santos Janet Santos	Case num	ber (if know	vn)
6.	Utilit	ies:			
0.	6a.	Electricity, heat, natural gas	6a.	\$	145.00
	6b.	Water, sewer, garbage collection	6b.	\$	105.00
	6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	60.00
	6d.	Other. Specify: Directy/internet	6d.	\$	130.00
		cell phones		\$	430.00
7.	Food	and housekeeping supplies	7.	\$	800.00
8.	Child	dcare and children's education costs	8.	\$	110.00
9.	Cloth	ning, laundry, and dry cleaning	9.	\$	50.00
10.		onal care products and services	10.	\$	50.00
11.		cal and dental expenses	11.	\$	20.00
12.		sportation. Include gas, maintenance, bus or train fare. ot include car payments.	12.	\$	300.00
13.		rtainment, clubs, recreation, newspapers, magazines, and books	13.	\$	75.00
		itable contributions and religious donations	14.	\$	0.00
15.		rance.			
		ot include insurance deducted from your pay or included in lines 4 or 20.		_	
		Life insurance	15a.	•	0.00
		Health insurance	15b.	·	0.00
		Vehicle insurance	15c.	·	399.00
40		Other insurance. Specify:	15d.	>	0.00
	Spec		16.	\$	0.00
17.		Illment or lease payments: Car payments for Vehicle 1	17a.	¢	0.00
		Car payments for Vehicle 2	17a. 17b.		0.00
		Other. Specify: ISPC - Water filtration system	17b. 17c.	· -	112.00
		Other. Specify:	17d. 17d.	· —	0.00
18.		payments of alimony, maintenance, and support that you did not report as		Ψ	
		icted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
19.	Othe	r payments you make to support others who do not live with you.		\$	0.00
	Spec	•	19.		
20.		r real property expenses not included in lines 4 or 5 of this form or on Sche			
		Mortgages on other property	20a.		0.00
		Real estate taxes	20b.		0.00
		Property, homeowner's, or renter's insurance Maintenance, repair, and upkeep expenses	20c.	· -	0.00
		Homeowner's association or condominium dues	20d. 20e.	· —	0.00
24		r: Specify:		Ψ +\$	0.00
21.	Otne	r: Specily.		+Φ	0.00
22.	Calc	ulate your monthly expenses			
		Add lines 4 through 21.		\$	2,886.00
	22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
	22c.	Add line 22a and 22b. The result is your monthly expenses.		\$	2,886.00
23.	Calc	ulate your monthly net income.			
	23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	5,728.26
	23b.	Copy your monthly expenses from line 22c above.	23b.	-\$	2,886.00
	220	Subtract your monthly expenses from your monthly income			
	230.	Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c.	\$	2,842.26
24.	For ex				increase or decrease because of a
	⊔ Y€	to			

Fill in this inform	ation to identify your	case:			
Debtor 1	Julian Santos				
	First Name	Middle Name	Last Name		
Debtor 2	Janet Santos				
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ban	kruptcy Court for the:	MIDDLE DISTRICT OF	FLORIDA		
Case number					dete te en
(ii known)				☐ Check if amende	
If two married peo You must file this obtaining money	on About a	r, both are equally responder, both are equally respondering the bankruptcy schedule in connection with a bar			
Sign	Below				
Did you pay	or agree to pay some	eone who is NOT an atto	rney to help you fill out bank	ruptcy forms?	
■ No					
☐ Yes. Na	ame of person			Attach Bankruptcy Petition Prep Declaration, and Signature (Offi	
	y of perjury, I declare true and correct.	that I have read the sur	nmary and schedules filed wi	ith this declaration and	
X /s/ Julia	n Santos		X /s/ Janet Santo	os	
Julian S	Santos		Janet Santos		
Signature	e of Debtor 1		Signature of Deb	otor 2	
Date A	ugust 21, 2018		Date August	21, 2018	

	in this inforr	nation to identify you	r case:						
De	btor 1	Julian Santos First Name	Middle News	LastName					
Del	btor 2	Janet Santos	Middle Name	Last Name					
	ouse if, filing)	First Name	Middle Name	Last Name					
Uni	ited States Ba	nkruptcy Court for the:	MIDDLE DISTRICT OF F	LORIDA					
Car	se number								
	nown)				_	heck if this is an mended filing			
					a	mended ming			
∩ f	ficial Ea	rm 107							
	ficial Fo		Affaira far Individ	duala Eilina far D	onkruptov				
			Affairs for Individ			4/16			
					equally responsible for supply additional pages, write you				
		n). Answer every que		una form. On the top of any	, additional pages, write you	i name and case			
Pai	rt 1: Give D	Details About Your Ma	rital Status and Where You	Lived Before					
1.		r current marital statu							
	.								
	■ Married□ Not mar								
_			Baratan attant						
2.	During the is	ast 3 years, nave you	lived anywhere other than	wnere you live now?					
	■ No	■ No							
	☐ Yes. Lis	st all of the places you I	ived in the last 3 years. Do no	ot include where you live now	'.				
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there			
3.	Within the la	ast 8 years, did you ev	ver live with a spouse or leg	gal equivalent in a commun	ity property state or territory	? (Community property			
stat	es and territor	ies include Arizona, Ca	lifornia, Idaho, Louisiana, Ne	vada, New Mexico, Puerto Ri	co, Texas, Washington and W	isconsin.)			
	■ No								
	☐ Yes. Ma	ake sure you fill out Sch	nedule H: Your Codebtors (Of	fficial Form 106H).					
		to the Occurred of Vers							
Pa	rt 2 Explai	in the Sources of You	r income						
4.					ear or the two previous caler	ndar years?			
		,	u received from all jobs and a have income that you receive	, 01					
	_	,	,						
	□ No ■ Voc Fil	l in the details.							
	■ 165. FII	i iii trie details.							
			Debtor 1		Debtor 2				
			Sources of income Check all that apply.	Gross income (before deductions and	Sources of income Check all that apply.	Gross income (before deductions			
			chock an trial apply.	exclusions)	chook an that apply.	and exclusions)			
		of current year until	■ Wages, commissions,	\$28,178.94	☐ Wages, commissions,	\$32,094.66			
the	date you file	d for bankruptcy:	bonuses, tips	•	bonuses, tips	•			
			☐ Operating a business		☐ Operating a business				

Official Form 107

Debtor Debtor		ian Santo net Santos				Case	e number (if known)		
				Debtor 1			Debtor 2		
				Sources of income Check all that apply.	Gross income (before deduction exclusions)	ons and	Sources of inc Check all that a		Gross income (before deductions and exclusions)
			31, 2017)	■ Wages, commissions, bonuses, tips	\$40,	\$40,000.00		nmissions,	\$56,751.81
				☐ Operating a business			☐ Operating a	business	
		dar year bef December 3		■ Wages, commissions, bonuses, tips	\$35,	171.04	■ Wages, combonuses, tips	ımissions,	\$58,421.10
				☐ Operating a business			Operating a	business	
	and other public benefit payments; pensions; winnings. If you are filing a joint case and you list each source and the gross income from No Yes. Fill in the details.				, J	,	,		
				Debtor 1			Debtor 2		
				Sources of income Describe below.	Gross income each source (before deduction exclusions)		Sources of inc Describe below		Gross income (before deductions and exclusions)
Part 3:	Lis	t Certain Pa	yments You	Made Before You Filed for	Bankruptcy				
6. Ard	<u> </u>							he total amount you	
		* Subject t	not include	payments to an attorney for to on 4/01/19 and every 3 year	his bankruptcy case	, ,			
Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$							of \$600 or more?	?	
		■ No.	Go to line 7						
☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total include payments for domestic support obligations, such as child support and a attorney for this bankruptcy case.									
Cı	reditor	's Name and	l Address	Dates of payme	ent Total ar	nount paid	Amount you still owe	Was this p	payment for

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Debtor									
Debtor	2 Janet Santos		Cas	se number (if known)					
<i>Ins</i> of v a b	Nithin 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? nsiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.								
	No								
	Yes. List all payments to an insider.								
	sider's Name and Address	Dates of payment	Total amount	Amount you	Reason for	this payment			
			paid	still owe					
ins	Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider.								
	No								
	Yes. List all payments to an insider								
In	sider's Name and Address	Dates of payment	Total amount	Amount you	Reason for	this payment			
			paid	still owe	Include cred				
Part 4:	Identify Legal Actions, Repossession	ns, and Foreclosures							
	difications, and contract disputes. No Yes. Fill in the details.								
	ase title ase number	Nature of the case	Court or agency		Status of the case				
E/	AGLE HOME MORTGAGE LLC vs. ANTOS, JULIAN JAVIERet al. 016-CA-010951-O	CA - Homestead Residential Foreclosure above \$250,000	Orange County 425 N Orange Orlando, FL 32	Ave	■ Pending □ On appeal □ Concluded				
					Notice of Sale 8/22/2018 11:00am				
-	thin 1 year before you filed for bankrupt eck all that apply and fill in the details belov		erty repossessed, f	oreclosed, garni	shed, attached	I, seized, or levied?			
	No. Go to line 11. Yes. Fill in the information below.								
Cr	reditor Name and Address	Describe the Property Date				Value of the			
		Explain what happened				property			
	accounts or refuse to make a payment because you owed a debt? No								
Cr	reditor Name and Address	Describe the action the	creditor took	Date	action was	Amount			
				taker	n				
	thin 1 year before you filed for bankrupt urt-appointed receiver, a custodian, or a		erty in the possess	ion of an assigne	e for the bene	efit of creditors, a			
	No Yes								
_									

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	otor 1 otor 2	Julian Santos Janet Santos		Case number	(if known)					
Pai	t 5:	List Certain Gifts and Contributio	ns							
13.	I	Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? ■ No □ Yes. Fill in the details for each gift.								
	Gifts	s with a total value of more than \$6 person	600	Describe the gifts	Dates you gave the gifts	Value				
	Pers Addr	on to Whom You Gave the Gift and ress:	d							
14.	I	Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No								
		Yes. Fill in the details for each gift or	contributi	on.						
	more	or contributions to charities that than \$600 rity's Name	total	Describe what you contributed	Dates you contributed	Value				
	Addr	Cess (Number, Street, City, State and ZIP Cod	de)							
Pai	t 6:	List Certain Losses								
15.	or gar	n 1 year before you filed for bankrombling? No Yes. Fill in the details.	uptcy or	since you filed for bankruptcy, did you lose any	thing because of the	it, fire, other disaster,				
		cribe the property you lost and the loss occurred	Include	the amount that insurance has paid. List pending acc claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost				
Pa	t 7:	List Certain Payments or Transfer	rs							
16.	Includ	ulted about seeking bankruptcy or le any attorneys, bankruptcy petition	preparir	d you or anyone else acting on your behalf paying a bankruptcy petition? s, or credit counseling agencies for services require		rty to anyone you				
	_	No								
		Yes. Fill in the details.								
	Addr Ema	on Who Was Paid ress il or website address on Who Made the Payment, if Not	You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment				
	The Orlando Law Group 12301 Lake Underhill Rd #213 Orlando, FL 32828			Attorneys Fees	8/8/18	\$1,500.00				
	1733 Suite	cus Credit Counseling 37 Ventura Boulevard e 205 ino, CA 91316		Credit Counseling Course	8/13/2018	\$50.00				
17.	prom		editors o	d you or anyone else acting on your behalf pay r to make payments to your creditors? ed on line 16.	or transfer any prope	rty to anyone who				
		No Yes. Fill in the details.								
		on Who Was Paid		Description and value of any property transferred	Date payment or transfer was made	Amount of payment				

		0430 0.10 BK 000	10 000 0001	1 1100 00/	21,10	r age do er or	
	otor 1 otor 2	Julian Santos Janet Santos			Case num	ber (if known)	
18.	transf Includ includ	n 2 years before you filed for bankrupto ferred in the ordinary course of your but le both outright transfers and transfers made le gifts and transfers that you have already No Yes. Fill in the details.	siness or financial affa de as security (such as t	irs? he granting of a			
	Addr	on Who Received Transfer ress on's relationship to you	Description and v property transferr		payme	be any property or ents received or debts n exchange	Date transfer was made
19.	Within benef	n 10 years before you filed for bankrupt ficiary? (These are often called asset-prot No	rection devices.)				·
	Nam	e of trust	Description and v	Description and value of the property tra		ferred	Date Transfer was made
Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benesold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details.							
		ress (Number, Street, City, State and ZIP	Last 4 digits of account number	Type of account or instrument		Date account was closed, sold, moved, or transferred	Last balanc before closing o transfe
	cash,	ou now have, or did you have within 1 ye or other valuables? No Yes. Fill in the details.	ear before you filed for	bankruptcy, ar	ny safe dep	osit box or other depos	itory for securities,
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)			Address (Number, Street, City,		the contents	Do you still have it?
22.	— N	you stored property in a storage unit or No Yes. Fill in the details.	r place other than your	home within 1	year befor	e you filed for bankrupto	cy?
		e of Storage Facility 'ess (Number, Street, City, State and ZIP Code)	Who else has or h to it?	ad access	Describe	the contents	Do you still have it?

Part 9: Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

Address (Number, Street, City,

No

☐ Yes. Fill in the details.

Owner's Name
Address (Number, Street, City, State and ZIP Code)

Where is the property?

(Number, Street, City, State and ZIP Code)

Code)

Describe the property

Value

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

Debtor 1 **Julian Santos**Debtor 2 **Janet Santos**

Case number (if known)

	toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.								
	Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.								
	Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.								
Rep	ort a	II notices, releases, and proceedings th	nat you know about, regardless of whe	n the	ey occurred.				
24.	Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?								
	■ No □ Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)		Governmental unit Address (Number, Street, City, State an ZIP Code)	d	Environmental law, if you know it	Date of notice			
25.	Hav	e you notified any governmental unit of	f any release of hazardous material?						
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it		Date of notice			
26.	Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.								
	■ No								
	Cas	Yes. Fill in the details. se Title	Court or agency	Nat	ture of the case	Status of the			
	Case Number		Name Address (Number, Street, City, State and ZIP Code)			case			
Par	t 11:	Give Details About Your Business or	Connections to Any Business						
27.	With	nin 4 years before you filed for bankrup	tcy, did you own a business or have ar	ny of	the following connections to any	/ business?			
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time								
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)								
	☐ A partner in a partnership								
	☐ An officer, director, or managing executive of a corporation								
	☐ An owner of at least 5% of the voting or equity securities of a corporation								
	■ No. None of the above applies. Go to Part 12.								
	Yes. Check all that apply above and fill in the details below for each business.								
	Business Name Address (Number, Street, City, State and ZIP Code)		Describe the nature of the business Name of accountant or bookkeeper		Employer Identification number				
					Do not include Social Security number or ITIN. Dates business existed				
28.		nin 2 years before you filed for bankrup itutions, creditors, or other parties.	tcy, did you give a financial statement	to ar	nyone about your business? Inclu	ude all financial			
		No Yes. Fill in the details below.							
	Naı		Date Issued						
		dress nber, Street, City, State and ZIP Code)							

Part 12: Sign Below

I have read the answers on this *Statement* of *Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 6

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Debtor Debtor			Case number (if known)					
with a			concealing property, or obtaining money or propert sonment for up to 20 years, or both.	ty by fraud in connection				
/s/ Ju	lian Santos	/s/ Jan	et Santos					
Juliar	n Santos	Janet S	antos					
Signat	ture of Debtor 1	Signatu	Signature of Debtor 2					
Date	August 21, 2018	Date	August 21, 2018					
Did you	u attach additional pages to Your S	tatement of Financial A	fairs for Individuals Filing for Bankruptcy (Official l	Form 107)?				
■ No								
☐ Yes								
Did you	u pay or agree to pay someone who	is not an attorney to he	lp you fill out bankruptcy forms?					
■ No								
☐ Yes.	. Name of Person Attach the	Bankruptcy Petition Prepa	rer's Notice, Declaration, and Signature (Official Form	119).				

Fill in this inform	nation to identify your case:
Debtor 1	Julian Santos
Debtor 2 (Spouse, if filing)	Janet Santos
United States E	Bankruptcy Court for the: Middle District of Florida
Case number	

Check	as directed in lines 17 and 21:
1	ording to the calculations required by this tement:
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).
•	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).
	3. The commitment period is 3 years.
	4. The commitment period is 5 years.

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income 1. What is your marital and filing status? Check one only. ☐ Not married. Fill out Column A, lines 2-11. ■ Married. Fill out both Columns A and B, lines 2-11. Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space. Column A Column B Debtor 1 Debtor 2 or non-filing spouse 2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all 5,001.83 3,553.50 payroll deductions). Alimony and maintenance payments. Do not include payments from a spouse if 0.00 0.00 Column B is filled in. 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include payments from a spouse. Do not include payments 0.00 0.00 you listed on line 3. 5. Net income from operating a business, Debtor 1 profession, or farm \$ 0.00 Gross receipts (before all deductions) 0.00 Ordinary and necessary operating expenses 0.00 Copy here -> \$ 0.00 0.00 Net monthly income from a business, profession, or farm \$ 6. Net income from rental and other real property Debtor 1 0.00 \$ Gross receipts (before all deductions) 0.00 -\$ Ordinary and necessary operating expenses 0.00 Copy here -> \$ 0.00 0.00 \$ Net monthly income from rental or other real property

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

Debtor 1 Debtor 2				Case number	r (<i>if known</i>)			
				Column A Debtor 1		Column B Debtor 2 non-filing	or	
7. I r	nterest, dividends, and royalties			\$	0.00	\$	0.00	
	nemployment compensation			\$	0.00	\$	0.00	
	o not enter the amount if you contend that the amount rene Social Security Act. Instead, list it here:	eceived was a benef	fit under					
	For you \$	0.	00					
	For your spouse \$ _	0.	00					
	ension or retirement income. Do not include any amou enefit under the Social Security Act.	unt received that wa	s a	\$	0.00	\$	0.00	
D re d	ncome from all other sources not listed above. Specific not include any benefits received under the Social Secevived as a victim of a war crime, a crime against huma omestic terrorism. If necessary, list other sources on a sotal below.	curity Act or payment nity, or international	nts or					
				\$	0.00	\$	0.00	
				\$	0.00	\$	0.00	
	Total amounts from separate pages, if any.		+	\$	0.00	\$	0.00	
	calculate your total average monthly income. Add line ach column. Then add the total for Column A to the total petermine How to Measure Your Deductions from	for Column B.	\$	5,001.83	+ \$ _	3,553.50		8,555.33
	-						\$	8,555.33
-	You are married and your spouse is filing with you. F							
	You are married and your spouse is not filing with yo Fill in the amount of the income listed in line 11, Colu dependents, such as payment of the spouse's tax lia	ımn B, that was NO						
	Below, specify the basis for excluding this income an adjustments on a separate page.	d the amount of inc	ome dev	oted to each	n purpose	e. If necessar	y, list additi	onal
	If this adjustment does not apply, enter 0 below.		\$ \$		_			
			+\$		_			
	Total		\$	0.0	c	opy here=>		0.00
14.	Your current monthly income. Subtract line 13 from line	ne 12.					\$	8,555.33
15.	Calculate your current monthly income for the year.	Follow these steps:						
	15a. Copy line 14 here=>						\$	8,555.33
	Multiply line 15a by 12 (the number of months in a	year).					x 1	2
	15b. The result is your current monthly income for the y	ear for this part of the	he form.				\$10	02,663.96

Julian Santos

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Debtor 1 Debtor 2					
16. C	Calculate the median family income that applies to	you. Follow these s	steps:		
1	6a. Fill in the state in which you live.	FL	_		
1	6b. Fill in the number of people in your household.	5			
	6c. Fill in the median family income for your state and		_	¢	82,912.00
	To find a list of applicable median income amount instructions for this form. This list may also be available.	s, go online using t	he link specified in the separate	Ψ_	
	low do the lines compare?	.			
1	7a. Line 15b is less than or equal to line 16c. 0 11 U.S.C. § 1325(b)(3). Go to Part 3. Do N				
1	7b. Line 15b is more than line 16c. On the top 1325(b)(3). Go to Part 3 and fill out Calc your current monthly income from line 14 a	ulation of Your Di			
Part 3	Calculate Your Commitment Period Under 11	U.S.C. § 1325(b)(4	4)		
18. C	Copy your total average monthly income from line	11.		\$	8,555.33
19. D	Deduct the marital adjustment if it applies. If you are contend that calculating the commitment period under a pouse's income, copy the amount from line 13.	e married, your spo	use is not filing with you, and you		
	9a. If the marital adjustment does not apply, fill in 0 on	line 19a.		- \$	0.00
1	9b. Subtract line 19a from line 18.			\$	8,555.33
20. C	Calculate your current monthly income for the year	. Follow these step	os:		
	0a. Copy line 19b	·		\$_	8,555.33
	Multiply by 12 (the number of months in a year).			,	x 12
2	Ob. The result is your current monthly income for the y	ear for this part of	the form	\$_	102,663.96
2	Oc. Copy the median family income for your state and	size of household	from line 16c	\$_	82,912.00
	M. Harrista the Processing Co.				
2	11. How do the lines compare?				
	Line 20b is less than line 20c. Unless otherwiperiod is 3 years. Go to Part 4.	ise ordered by the	court, on the top of page 1 of this form, ch	eck box 3,	The commitment
	Line 20b is more than or equal to line 20c. Up commitment period is 5 years. Go to Part 4.	nless otherwise ord	lered by the court, on the top of page 1 of	this form, c	heck box 4, The
Part 4	Sign Below				
В	By signing here, under penalty of perjury I declare that	the information on	this statement and in any attachments is t	rue and cor	rect.
X	/s/ Julian Santos)	(/s/ Janet Santos		
	Julian Santos		Janet Santos		
	Signature of Debtor 1 Date August 21, 2018		Signature of Debtor 2 Date August 21, 2018		
J	MM / DD / YYYY		MM / DD / YYYY		
lf	you checked 17a, do NOT fill out or file Form 122C-2				
If	you checked 17h fill out Form 122C-2 and file it with	this form On line 3	9 of that form, convivour current monthly	income from	n line 14 ahove

Debtor 1

				_		
Fill in t	this information to i	dentify your case:				
Debtor	Julian Sa	ntos				
Debtor	2 Janet Sar	utos				
(Spous	e, if filing)					
United	States Bankruptcy C	ourt for the: Middle District	t of Florida			
Case n				□ Check i	if this is an amended	filing
(if know	vii)			_ = = = = = = = = = = = = = = = = = = =	Timo to arramonada	ımıy
	Form 122C-2	lation of Varia	. Diamanahin in			
Cna	pter 13 Cald	culation of Your	r Disposable ir	ncome		04/16
	ut this form, you wi tment Period (Offici		py of <i>Chapter 13 Stateme</i>	nt of Your Current Monthly I	ncome and Calculation	n of
Be as c	omplete and accura	te as possible. If two marri	ied people are filing toge	ther, both are equally respon	sible for being accura	ate. If more
space is	s needed, attach a s	•	, Include the line number	to which additional informat	•	
		·	,			
Part 1:	Calculate Your	Deductions from Your Inc	ome			
the c	questions in lines 6-		rds, go online using the I	r certain expense amounts. I ink specified in the separate		
expe	enses if they are high	er than the standards. Do no	t include any operating exp	ense. In later parts of the form, penses that you subtracted from income in line 13 of Form 122	n income in lines 5 and	
If you	ur expenses differ fro	m month to month, enter the	e average expense.			
•	·			nation required by a similar forr	n used in chapter 7 cas	es.
5.	The number of peo	ple used in determining yo	our deductions from inco	me		
		people who could be claimed ny additional dependents wh e in your household.			5	
Natio	onal Standards	You must use the IRS N	National Standards to answ	ver the questions in lines 6-7.		
				,		
		l other items: Using the nun dollar amount for food, clothi		in line 5 and the IRS National	\$	2,051.00
	the dollar amount for people who are 65 d	out-of-pocket health care. T	Γhe number of people is sp le have a higher IRS allowa	tered in line 5 and the IRS Nat lit into two categoriespeople v ance for health car costs. If you 22.	who are under 65 and	

Official Form 22C-2

	اد ما							m)			
	16 M	ho are under 65 years of age									
7	7a.	Out-of-pocket health care allowance per person	\$	52							
7	7b.	Number of people who are under 65	X	5							
7	7c.	Subtotal. Multiply line 7a by line 7b.	\$	260.00		Copy here	=> :	\$2	260.00		
Peop	le w	rho are 65 years of age or older									
7	7d.	Out-of-pocket health care allowance per person	\$	114							
7	7e.	Number of people who are 65 or older	Χ	0							
7	7f.	Subtotal. Multiply line 7d by line 7e.	\$	0.00		Copy here	=> 3	\$	0.00		
7	∕g.	Total. Add line 7c and line 7f			\$	260.00		Copy to	tal here=>	\$	260.00
Local	Sta	andards You must use the IRS Local Standards to	o answei	r the questic	ns in lir	nes 8-15.					
Base	d or	n information from the IRS, the U.S. Trustee Process purposes into two parts:		•			ard fo	r housing	g for		
■ нс	usi	ng and utilities - Insurance and operating expen	ses								
■ Ho	ousi	ng and utilities - Mortgage or rent expenses									
separ 8. I	ate Iou	er the questions in lines 8-9, use the U.S. Truster instructions for this form. This chart may also be sing and utilities - Insurance and operating experted edular amount listed for your county for insurance and operating experted in the county for insurance and other insurance are county for insurance and other insurance are county for insurance are considered.	e availa enses: ∪	ble at the b	ankrup mber of	tcy clerk's o	ffice.	·		pecified ir	669.00
9. I	Hou	sing and utilities - Mortgage or rent expenses:									
9	a.	Using the number of people you entered in line 5, f listed for your county for mortgage or rent expense		dollar amou	nt		:	\$1,4	107.00		
9	9b.	Total average monthly payment for all mortgages a	nd other	debts secu	red by y	our home.					
		To calculate the total average monthly payment, accontractually due to each secured creditor in the 60 for bankruptcy. Next divide by 60.									
		Name of the creditor		verage moi ayment	nthly						
		Universal Amer Mortg/d	\$	2,1	76.26						
		Wyndham Lakes Estates HOA	\$	1	15.00						
		9b. Total average monthly paymer	nt \$	2,2	91.26	Copy here=>	-\$_	2,	291.26	Repeat th on line 33	is amount a.
9	Эс.	Net mortgage or rent expense.							_		
		Subtract line 9b (total average monthly payment) fror rent expense). If this number is less than \$0, ent		9a (<i>mortga</i> g	е	\$		0.00	Copy here=>	\$	0.00
		ou claim that the U.S. Trustee Program's division cts the calculation of your monthly expenses, fill					g is in	correct a	and	\$	0.00
	Exp	olain why:									

ebtor 1 ebtor 2		n Santos Santos				Case number	er (if known)		
11.	Local tra	nsportation expenses: Check the number	of vehic	cles for whi	ch you claim	an owners	hip or operatin	g expense.	
	□ 0. Go	to line 14.							
	■ 1. Go	to line 12.							
	□ 2 or m	ore. Go to line 12.							
		pperation expense: Using the IRS Local Street expenses, fill in the Operating Costs that a							196.00
	You may	ownership or lease expense: Using the IR not claim the expense if you do not make a n two vehicles.							
Ver	icle 1	Describe Vehicle 1: 2013 Mazda CX9	97000	miles Vi	n: JM3TB2l	DA6D041	3723		
13a.	Ownersh	ip or leasing costs using IRS Local Standard					497.00		
		monthly payment for all debts secured by V				· <u> </u>			
	•	clude costs for leased vehicles.							
	are contr	ate the average monthly payment here and actually due to each secured creditor in the cy. Then divide by 60.				at			
	Nan	ne of each creditor for Vehicle 1		Average payment	monthly				
	Ally	/ Financial		\$	565.10				
		Total Average Monthly Pay	ment	\$	565.10	Copy here =>	-\$56	Repeat this amount on line 33b.	
		cle 1 ownership or lease expense line 13b from line 13a. if this number is less	than \$0	, enter \$0.		\$	0.00	Copy net Vehicle 1 expense here => \$	0.00
Ver	icle 2	Describe Vehicle 2:							
13d.	Ownersh	ip or leasing costs using IRS Local Standard	d			. \$	0.00		
	Average leased ve	monthly payment for all debts secured by V Phicles.	ehicle 2.	Do not inc	clude costs fo	r			
	Nan	ne of each creditor for Vehicle 2		Average payment	monthly				
				\$					
		Total average monthly pay	ment	\$		Copy here => -\$	0.0	Repeat this amount on line 33c.	
		cle 2 ownership or lease expense line 13e from line 13d. if this number is less	than \$0	, enter \$0.		\$	0.00	Copy net Vehicle 2 expense here => \$	0.00
		ansportation expense: If you claimed 0 v ransportation expense allowance regard						in the \$	0.00
	also dedu	al public transportation expense: If you cut a public transportation expense, you may more than the IRS Local Standard for <i>Public</i>	y fill in w	hat you be					0.00

Debtor 1

Debtor 1 Debtor 2 Julian Santos

Case number (if known)

Oth	er Necessary Expenses	In addition to the expense of the following IRS categories		ns listed above	, you are allowed your monthly expenses	s for	
16.	self-employment taxes, soo your pay for these taxes. H	cial security taxes, and Medic lowever, if you expect to rece rom the total monthly amount	are taxe	es. You may ind c refund, you m	d local taxes, such as income taxes, clude the monthly amount withheld from just divide the expected refund by 12 for taxes.	\$	1,137.73
17.	•	The total monthly payroll ded	uctions t	hat your job re	guires, such as retirement		
	contributions, union dues, a	and uniform costs.				\$	175.79
40		, ,,,,	-	•	1(k) contributions or payroll savings.	Ψ	
18.	filing together, include payr	ments that you make for your or life insurance on your depe	spouse	's term life insu	e insurance. If two married people are rance. spouse's life insurance, or for any form	\$	0.00
19.	administrative agency, such	The total monthly amount the has spousal or child support n past due obligations for spo	paymer	nts.	by the order of a court or You will list these obligations in line 35.	\$	0.00
20.		hly amount that you pay for e			_		
	as a condition for your jo	, , , ,					
	for your physically or me	entally challenged dependen	t child if	no public educ	ation is available for similar services.	\$	0.00
21.	Childcare: The total month Do not include payments for	\$	0.00				
22.	Additional health care ex that is required for the heal by a health savings accour	\$	0.00				
00	•	nce or health savings accour			y in line 25. you pay for telecommunication services	Ψ_	
	for you and your dependen phone service, to the exten income, if it is not reimburs Do not include payments for	its, such as pagers, call waiting the cessary for your health a ed by your employer. The basic home telephone, interested to the control of	ng, calle and welfa ernet and	r identification, are or that of your dicell phone se	special long distance, or business cell our dependents or for the production of rvice. Do not include self-employment ount you previously deducted.	+\$_	75.00
24.	Add all of the expenses a Add lines 6 through 23.	llowed under the IRS expe	nse allo	wances.		\$	4,564.52
Add	litional Expense Deduction	These are additional d Note: Do not include a					
25.					ises. The monthly expenses for health ly necessary for yourself, your spouse, or	or	
	Health insurance		\$	701.28			
	Disability insurance		\$	35.80			
	Health savings account	4	\$	0.00	7		
	Total		\$	737.08	Copy total here=>	\$	737.08
	Do you actually spend this No. How much do y						
	Yes	ar areas y ar array	\$				
26.	continue to pay for the reas	sonable and necessary care	and supp o is una	oort of an elder ble to pay for s	e actual monthly expenses that you will ly, chronically ill, or disabled member of uch expenses. These expenses may 29A(b)	\$	0.00
27.					nses that you incur to maintain the es Act or other federal laws that apply.		
	, , ou and , our runn	,					

Debtor 1 Debtor 2	Julian Santos Janet Santos	Case	e number (<i>if known</i>)		
	Additional home energy costs. Your home line 8.	energy costs are included in your insurance	and operating expenses on		
	If you believe that you have home energy co 8, then fill in the excess amount of home energy		s included in expenses on line)	
	You must give your case trustee documenta amount claimed is reasonable and necessar		show that the additional	\$	0.00
	Education expenses for dependent childr \$160.42* per child) that you pay for your depublic elementary or secondary school.	en who are younger than 18. The monthly endent children who are younger than 18 ye	expenses (not more than ars old to attend a private or		
	You must give your case trustee documentar claimed is reasonable and necessary and no		explain why the amount		
	* Subject to adjustment on 4/01/19, and ever	y 3 years after that for cases begun on or aft	ter the date of adjustment.	\$	0.00
	Additional food and clothing expense. Th higher than the combined food and clothing than 5% of the food and clothing allowances	allowances in the IRS National Standards. The			
	To find a chart showing the maximum addition instructions for this form. This chart may also				
	You must show that the additional amount cl	aimed is reasonable and necessary.		\$	0.00
	Continuing charitable contributions. The instruments to a religious or charitable organ		the form of cash or financial		
	Do not include any amount more than 15% of	of your gross monthly income.		\$	0.00
	Add all of the additional expense deduction Add lines 25 through 31.	ons.		\$	737.08
Dedu	uctions for Debt Payment				
le T	For debts that are secured by an interest in pans, and other secured debt, fill in lines of For calculate the total average monthly payme preditor in the 60 months after you file for ban	33a through 33e. nt, add all amounts that are contractually due			
	Mortgages on your home			Average	e monthly t
33a.	Copy line 9b here		=>	\$	2,291.26
	Loans on your first two vehicles				
33b.	Copy line 13b here		=>	\$	565.10
33c.				\$	0.00
33d.	List other secured debts:				
Nam	e of each creditor for other secured debt	Identify property that secures the debt	Does payment include taxes or insurance?		
	Independent Savings Plan		■ No		
	Company (ISPC)	Water Filtration System	☐ Yes	\$	112.00
			□ No		
			☐ Yes	\$	
			□ No		
			☐ Yes	+\$	
33e	Total average monthly payment. Add lines	33a through 33d	\$ 2,968.36 Copy total heres	 	2,968.36

ebtor 1 ebtor 2		in Santos et Santos			Cas	se n	umber (<i>if known</i>)			
		debts that you listed in lin property necessary for yo				€,				
	No.	Go to line 35.								
	Yes.	State any amount that you listed in line 33, to keep po Next, divide by 60 and fill i	ossession of your propert							
Name	of the	creditor	Identify property that so	ecures the del	bt	To	otal cure amount			y cure
-NON	NE-				\$		-	a ÷ 60 = \$	moun	
					Total	\$	0.00	Copy total here=	\$	0.00
are	past No.	owe any priority claims - s due as of the filing date o Go to line 36.	f your bankruptcy case	? 11 U.S.C. {	§ 507.	nat				
Ц	Yes.	Fill in the total amount of a ongoing priority claims, sur			de current or					
		Total amount of all past-o	due priority claims			\$	0.00	÷ 60	\$_	0.00
36. Pro	ojecte	d monthly Chapter 13 plar	n payment			\$	2,968.36			
Off the To	ice of Exections Exections in the Execution in the Execut	nultiplier for your district as a the United States Courts (foutive Office for United State at of district multipliers that inclustructions for this form. This lis	or districts in Alabama and s Trustees (for all other d udes your district, go online u	d North Caro istricts). Ising the link s	lina) or by	X	10.00			
Ave	erage	monthly administrative expe	ense				\$296.84	Copy tota here=>		296.84
		of the deductions for deb	t payment.						\$_	3,265.20
Total [Deduc	tions from Income								
38. Ad	d all c	of the allowed deductions.								
		e 24, All of the expenses allowances	llowed under IRS	\$	4,564.52	2				
С	opy lin	e 32, All of the additional e			737.08	3_				
С	opy lin	e 37, All of the deductions	for debt payment		3,265.20)				
T,	otal de	ductions		\$	8,566.80)	Copy total here=>		\$	8,566.80

ebtor 1 ebtor 2						Case number (if known)						
art 2:	Determine You	ur Disposable Income Under 11 U.S.0	C. § 1325	(b)(2)								
		rent monthly income from line 14 of Current Monthly Income and Calcula					\$	8,555.33				
ch dis red	ildren. The month sability payments forceived in accordan	oly necessary income you receive for ally average of any child support paymer or a dependent child, reported in Part I ace with applicable nonbankruptcy law t ended for such child.	nts, foster	care payments, or 122C-1, that you	\$	C	0.00					
em in	nployer withheld fro	etirement deductions. The monthly to om wages as contributions for qualified (7) plus all required repayments of loads. § 362(b)(19).	retireme	nt plans, as specified	\$_	C	0.00					
42. To	tal of all deduction	ons allowed under 11 U.S.C. § 707(b)	(2)(A). Co	ppy line 38 here=>	\$	8,566	5.80					
ex the	penses and you ha	ial circumstances. If special circumsta ave no reasonable alternative, describe must give your case trustee a detailed locumentation for the expenses.	the spec	cial circumstances and								
Descr	ibe the special ci	rcumstances		Amount of expen	se							
				\$ \$								
				\$								
			Total \$	0.00	Copy here=		0.00					
44. To	rtal adjustments.	Add lines 40 through 43.		=> \$		8,566.80	Copy here=> -\$	8,566.80				
45. C a	ilculate your mor	athly disposable income under § 132	5(b)(2). S	subtract line 44 from line	e 39.		\$	-11.47				
rt 3:	Change in Inc	ome or Expenses										
ha tim yo	ve changed or are ne your case will b u filed your petition	or expenses. If the income in Form 122 virtually certain to change after the date of eopen, fill in the information below. For n, check 122C-1 in the first column, ent in when the increase occurred, and fill	te you file example er line 2 i	d your bankruptcy peti e, if the wages reported n the second column, e	tion a incre	nd during the ased after						
Form	Line	Reason for change		Date of change		ncrease or ecrease?	Amount of ch	ange				
☐ 122 ☐ 122 ☐ 122 ☐ 122 ☐ 122 ☐ 122	C-2 C-1 C-2					Increase Decrease Increase Decrease Increase Increase Decrease Decrease	\$ \$					
<u> </u>	C-1 C-2					Increase Decrease	\$					

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Debtor 1 Debtor 2	Julian Santos Janet Santos	Case number (if known)		
Part 4:	Sign Below			
E	By signing here, under penalty of perjury you declare that the inform	ation on this statement and in any attachments is true and correct.		
X.	/s/ Julian Santos Julian Santos Signature of Debtor 1	X /s/ Janet Santos Janet Santos Signature of Debtor 2		
Date	August 21, 2018 MM / DD / YYYY	Date August 21, 2018 MM / DD / YYYY		

Debtor 1	Julian Santos		
	Janet Santos	Case number (if known)	

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 02/01/2018 to 07/31/2018.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Employment

Income by Month:

6 Months Ago:	02/2018	\$5,578.25
5 Months Ago:	03/2018	\$6,486.88
4 Months Ago:	04/2018	\$4,932.16
3 Months Ago:	05/2018	\$7,233.24
2 Months Ago:	06/2018	\$5,780.43
Last Month:	07/2018	\$0.00
	Average per month:	\$5,001.83

Debtor 1	Julian Santos	
	Janet Santos	Case number (if known)

Current Monthly Income Details for the Debtor's Spouse

Spouse Income Details:

Income for the Period 02/01/2018 to 07/31/2018.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: **Employment**

Income by Month:

6 Months Ago:	02/2018	\$2,574.55
5 Months Ago:	03/2018	\$4,480.90
4 Months Ago:	04/2018	\$3,836.46
3 Months Ago:	05/2018	\$3,928.33
2 Months Ago:	06/2018	\$4,782.64
Last Month:	07/2018	\$1,718.14
	Average per month:	\$3,553.50

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapte	er 7:	Liquidation
	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	¢310	total foo

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy Court Middle District of Florida

m re	Janet Santos		Case No.	
		Debtor(s)	Chapter	13
	VEI	RIFICATION OF CREDITOR	MATRIX	
Γhe ab	ove-named Debtors hereby verify	y that the attached list of creditors is true and o	correct to the best	of their knowledge.
Date:	August 21, 2018	/s/ Julian Santos		
		Julian Santos Signature of Debtor		
Date:	August 21, 2018	/s/ Janet Santos		
		Janet Santos		

Signature of Debtor

Julian Santos

Julian Santos 1848 Penrith Loop Orlando, FL 32824

Janet Santos 1848 Penrith Loop Orlando, FL 32824

Sophia Dean The Orlando Law Group 12301 Lake Underhill Rd Suite 213 Orlando, FL 32828

Ally Financial Attn: Bankruptcy Dept Po Box 380901 Bloomington, MN 55438

Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Independent Savings Plan Company (ISPC) 1115 Gunn Highway Suite 100 Odessa, FL 33556

Nelnet Attn: Claims Po Box 82505 Lincoln, NE 68501

Universal Amer Mortg/d 1 Corporate Dr Lake Zurich, IL 60047

Wyndham Lakes Estates HOA 6972 Lake Gloria Blvd. Orlando, FL 32809 B2030 (Form 2030) (12/15)

United States Bankruptcy Court Middle District of Florida

In	Julian Santos re Janet Santos		Case No.	
		Debtor(s)	Chapter	13
	DISCLOSURE OF COMP	ENSATION OF ATTOR	RNEY FOR DE	EBTOR(S)
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 20 compensation paid to me within one year before the fibe rendered on behalf of the debtor(s) in contemplation	iling of the petition in bankruptcy,	or agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept		\$	3,500.00
	Prior to the filing of this statement I have received			1,500.00
	Balance Due			2,000.00
2.	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
3.	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
4.	■ I have not agreed to share the above-disclosed con	mpensation with any other person	unless they are mem	bers and associates of my law firm.
	☐ I have agreed to share the above-disclosed compe copy of the agreement, together with a list of the			
5.	In return for the above-disclosed fee, I have agreed to	render legal service for all aspect	s of the bankruptcy c	ease, including:
	 a. Analysis of the debtor's financial situation, and rer b. Preparation and filing of any petition, schedules, s c. Representation of the debtor at the meeting of cred d. [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and applications of the secured creditors of the secured credi	tatement of affairs and plan which litors and confirmation hearing, and o reduce to market value; exe tions as needed; preparation	may be required; and any adjourned hea	rings thereof;
6.	By agreement with the debtor(s), the above-disclosed Representation of the debtors in any any other adversary proceeding.	dischargeability actions, judi		es, relief from stay actions or
		CERTIFICATION		
this	I certify that the foregoing is a complete statement of bankruptcy proceeding.	any agreement or arrangement for	payment to me for re	epresentation of the debtor(s) in
_	August 21, 2018	/s/ Sophia Dean		
	Date	Sophia Dean Signature of Attorne The Orlando Law 12301 Lake Unde Suite 213 Orlando, FL 3282 407-512-4394 sdean@theorland	Group rhill Rd 8	